SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 OF 36 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
	Detailed Suffillary Page	13 14 15 16 17
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NAME OF COMMITTEE (In Full) JOHN S FUND		
Full Name (Last, First, Middle Initial) American College Of Cardiology Politic	al Action Committee	Date of Receipt
Mailing Address 2400 N Street NW		09 28 2012
City Washington	State Zip Code DC 20037-1153	Transaction ID : SA11C-897-1402-c Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00375360	1500
Name of Employer	Occupation	— Contribution
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1500	
Full Name (Last, First, Middle Initial) American Dental Political Action Cmte.		Date of Receipt
Mailing Address 1111 14th Street NW Suite 1100		09 17 2012
City Washington	State Zip Code DC 20005-5627	Transaction ID : SA11C-375-1412-c Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00000729	1000
Name of Employer	Occupation	Contribution
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000	
Full Name (Last, First, Middle Initial) C. American Hotel And Lodging Association Pac		Date of Receipt
Mailing Address 1201 New York Avenue NW Floor 6		07 31 2012
City Washington	State Zip Code DC 20005-3917	Transaction ID : SA11C-588-1422-c Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00001198	2000
Name of Employer	Occupation	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4000	
SUBTOTAL of Receipts This Page (optional)		4500.00
TOTAL This Period (last page this line number of	nly)	